MASSACHUSETTS STATE RACING COMMISSION

1 Ashburton Place Room 1313 Boston, MA 02108

C/O Suffolk Downs 111 Waldermar Ave. East Boston, MA 02128 **FAX** # 617-727-2581 **FAX** # 617-561-0803

Date	License #			
Cash / Check #				
Total Fees	Inspector			
New	Renewal			
OFFICE USE ONLY				

LICENSE APPLICATION	THOROUGHBRED			
JOCKEY AGENT \$60 BADGE \$5 Fee must accompany this application. Make check payable to M.S.R.C.				
NAME(PRINT) Last	First	/	ipplicable	
PERMANENT MAILING ADDRES		SOCIAL SECURITY NUMBER:		
	_			
Street		DATE OF BIRTH: -		
City PRESENT ADDRESS	State Zip Code	ft in(s) lbs	ES M F	
Street	 	HOME PHONE NUMBER:		
City PLACE OF BIRTH	State Zip Code	CELL PHONE NUMBER:		
City State	Country other than U.S.A.	FAX NUMBER:		
TO ACT AS AN AGENT FOR:				
JOCKEY	NAME(PRINT) Last	First	Middle	
JOCKEY	NAME(PRINT) Last	First	Middle	
APPRENTICE JOCKEY	NAME(PRINT) Last	First	Middle	
List your experience in racing				
Name of Jockeys for whom you have acted as an agent during the past year State Track				
1 Have you hold only region in	poppos in the post two years?			
Have you held any racing lid If yes, what state(s)		ensed as	Yes No	